

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Majority PAC			FEC IDENTIFICATION NUMBER ▼ C C00484642		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div> / <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div> </div>		
Full Name of Payee Ambrosino Muir Hansen Crounse			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div></div> 10 / 22 / 2014		
Mailing Address 500 Sansome St Ste 201			Amount <div style="border: 1px solid black; width: 100%; text-align: right;">24250.00</div>		
City State Zip Code San Francisco CA 94111-3215		Transaction ID : VN7GB9X8FG6 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div></div>			
Purpose of Expenditure Direct Mail - Estimate		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>			
Name of Federal Candidate Thom R Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; text-align: right;">8983778.07</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Blueprint Interactive			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div></div> 10 / 22 / 2014		
Mailing Address 1155 Connecticut Ave NW Ste 601			Amount <div style="border: 1px solid black; width: 100%; text-align: right;">99200.00</div>		
City State Zip Code Washington DC 20036-4306		Transaction ID : VN7GB9X6490 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div></div><div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div></div>			
Purpose of Expenditure Online Advertising		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>			
Name of Federal Candidate Joni Ernst			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: IA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; width: 150px; text-align: right;">4366489.55</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; width: 100%; text-align: right;">123450.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; width: 100%; text-align: right;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; width: 100%; text-align: right;"></div>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 40%;"> <p style="text-align: center;"><i>Rebecca Lambe</i></p> <p>Signature</p> </div> <div style="width: 20%; text-align: center;"> <p>[Electronically Filed]</p> </div> <div style="width: 20%; text-align: center;"> <p>Date</p> <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">M</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">D</div></div> <div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div><div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">Y</div></div> </div> </div> </div>					